

Application Data Sheet

Application Information

Application number::

Filing Date::

Herewith

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

PAPER-BASED INTERFACE FOR MULTIMEDIA
INFORMATION STORED BY MULTIPLE
MULTIMEDIA DOCUMENTS

Attorney Docket Number::

015358-007400US

Request for Early Publication::

No

Request for Non-Publication::

Yes

Suggested Drawing Figure::

14

Total Drawing Sheets::

34

Small Entity?::

No

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type: Inventor
Primary Citizenship Country: US
Status: Full Capacity
Given Name: Jonathan
Middle Name: J.
Family Name: Hull
Name Suffix:
City of Residence: San Carlos
State or Province of Residence: CA
Country of Residence: US
Street of Mailing Address: 751 Laurel Street PMB 434
City of Mailing Address: San Carlos
State or Province of mailing address: CA
Country of mailing address: US
Postal or Zip Code of mailing address: 94070

Applicant Authority Type: Inventor
Primary Citizenship Country: US
Status: Full Capacity
Given Name: Jamey
Middle Name:
Family Name: Graham
Name Suffix:
City of Residence: San Jose
State or Province of Residence: CA
Country of Residence: US
Street of Mailing Address: 1196 Shasta Avenue

City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95126

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::